

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission	14/03/2022 13:05 (SGT)
Date of Accident	12/03/2022 16:30 (SGT)
Exact Location of Accident	Paya Lebar Rd, Singapore
Additional Location Information	Heading towards Macpherson Road
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM5251Z
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	GRAB RENTALS PTE LTD
Company Reg No	201617200G
Email Address	gr.sg.accident@grab.com
Mobile Phone No	(Phone) +65-90905770
Alternative Phone No	(Office) +65-66550005

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Qashqai
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Private hire
Transmission	Auto
CC	1197

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	D21MFL0000447_01
Cover Note Number	-

DRIVER

Name of Driver	TEO ZHENG WEN, JOSHUA AMADEUS
NRIC No	S9103241D

Date Of Birth	18/01/1991
Occupation	Outdoor
Date Of Driving Pass	28/01/2010
Driving experience	12 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98220881
Alt. Phone Number	-
Email Address	gr.sg.accident@grab.com
Address	BLK 58 MARINE TERRACE #10-63
Address complement	-
Postcode	440058
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Chain Collision
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
Gender	Female

PASSENGER 2

Name	UNKNOWN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 12/03/2022, APPROXIMATELY ABOUT 1630HRS, IT WAS RAINING HEAVILY AND THERE WAS PASSENGERS ON BOARD. I WAS DRIVING FROM PAYA LEBAR ROAD HEADING TOWARDS MACHPERSON ROAD. I WAS DRIVING ON THE CENTRE LANE IN A SLOW PACE AS THE ROAD WAS WET. I SIGNAL TO THE LEFT AS I INTEND TO MAKE A LEFT TURN. I CHECKED ON THE CLEARANCE AND IT WAS IN MY FAVOUR, HOWEVER, VEHICLE SKT9026G IN FRONT OF ME SUDDEN JAM BRAKE. I APPLIED MY BRAKE AND HOWEVER DUE TO THE WET ROAD SURFACE MY VEHICLE STILL COLLIDED REAR OF SKT9026G CAUSING SKT9026G TO HIT SJM3438P. I WISH TO STATE THAT THERE IS NO INJURY.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKT9026G
Vehicle Manufacturer	Toyota
Vehicle Model	LEXUS UX250H 5DR SUV (AT)
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHIA LILI (XIE LILI)
NRIC No	S7335097B
Contact Number	(Phone) +65-91012673
Address	-
Address complement	116 JALAN KELICHAP
Postcode	534320
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1



DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJM3438P
Vehicle Manufacturer	Toyota
Vehicle Model	Corolla
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	RAPHAEL LUKE NESARAJ S/O RAVINDRAN RUFUS
NRIC No	S9437928H
Contact Number	(Phone) +65-94894211
Address	-
Address complement	BLK 325 YISHUN CENTRAL #08-365
Postcode	760325
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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 7. By the lodgement of this report to the Insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
 8. Consent under the Personal Data Protection Act (PDPA)
- I understand, acknowledge, agree and consent that :
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 Policyholder's Signature / Date & Time	 Driver's Signature (If driver is not the policyholder) / Date & Time 12/03/2022 1800HRS	Witnessed by Reporting Centre personnel
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Sketch Plan



Describe Circumstances of the Accident

ON 12/03/2022, APPROXIMATELY ABOUT 1630HRS, IT WAS RAINING HEAVILY AND THERE WAS PASSENGERS ON BOARD. I WAS DRIVING FROM PAYA LEBAR ROAD HEADING TOWARDS MACHPERSON ROAD. I WAS DRIVING ON THE CENTRE LANE IN A SLOW PACE AS THE ROAD WAS WET. I SIGNAL TO THE LEFT AS I INTEND TO MAKE A LEFT TURN. I CHECKED ON THE CLEARANCE AND IT WAS IN MY FAVOUR, HOWEVER, VEHICLE SKT9026G INFRONT OF ME SUDDEN JAM BRAKE. I APPLIED MY BRAKE AND HOWEVER DUE TO THE WET ROAD SURFACE MY VEHICLE STILL COLLIDED REAR OF SKT9026G CAUSING SKT9026G TO HIT SJM3438P. I WISH TO STATE THAT THERE IS NO INJURY.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time
12/03/2022 1800HRS

Witnessed by Reporting Centre
nnel







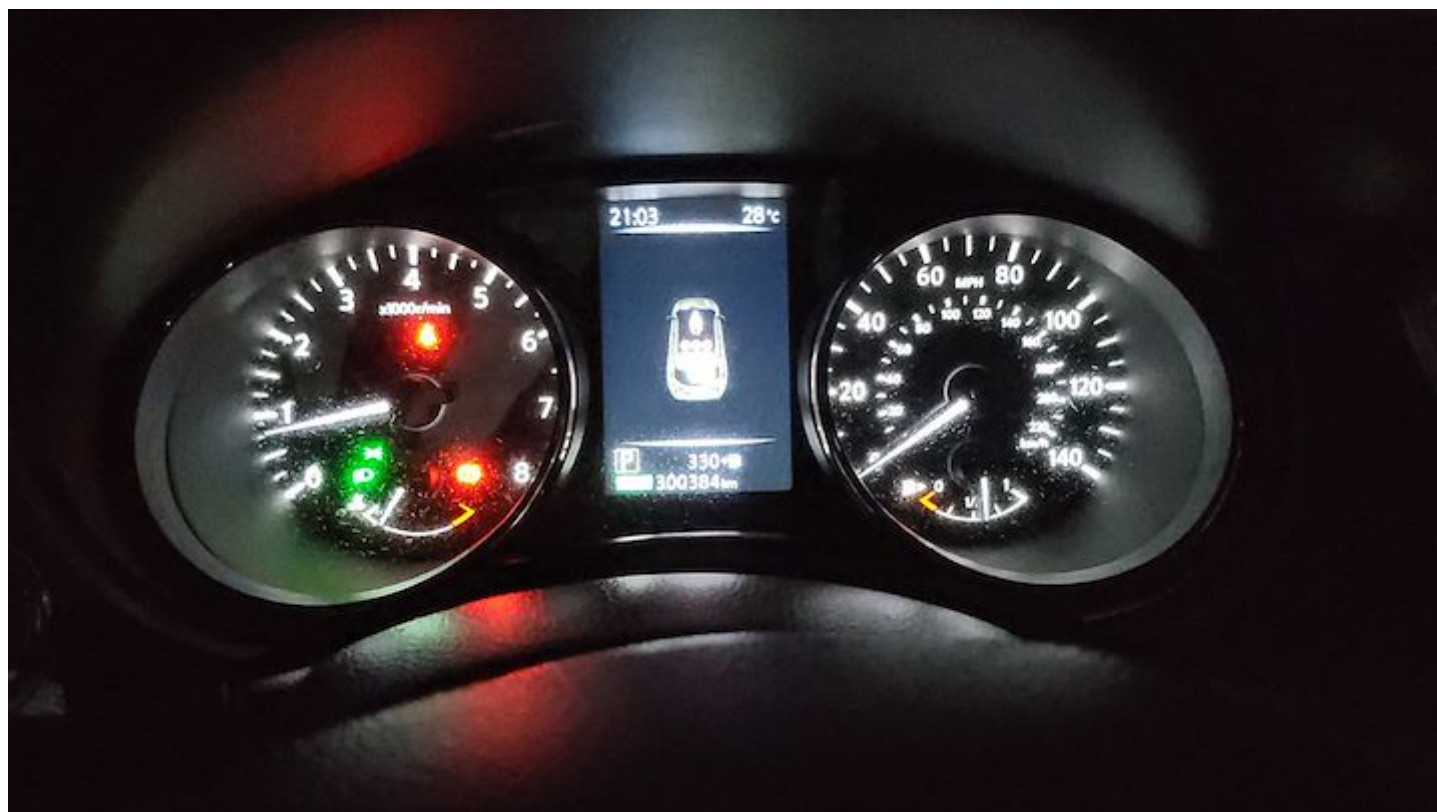
















IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SA1P223C0004 Vehicle Registration No: SLM5251Z
 Name (as shown in NRIC): GRAB RENTALS PTE LTD NRIC/FIN/Passport No: 201617200G
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: 18 SIN MING LANE, #01-08, MIDVIEW CITY Singapore (573960)
 Contact (Tel): 66550005 Mobile No.: 90905770
 Email Address: gr.sg.accident@grab.com
 Date of Accident: 12/03/2022 Time of Accident: 00:00
 Place of Accident: PAYA LEBAR ROAD, HEADING TOWARDS MACPHERSON ROAD
 Insurance Company: INDIA INTERNATIONAL INSURANCE PTE LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

TO AMEND THE TIME OF ACCIDENT FROM 00:00 TO 16:30

Policyholder / Driver's Signature
Date:


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: